## PROGRESS SHEET – APPLICATION FOR CHANGE/TRANSFER

NAME: McCain Foods USA, Inc.

Interested Parties List on reverse side

P.O. Box 607 Othello, WA 99344 800-938-7799			CONTACT: Dan Haller, Aspect Consulting PHONE: 509-895-5462 EMAIL: dhaller@aspectconsulting.com		
ASSIGNED (SEE )	BACK OF PAGE)		With	drau	// 7-/6-201 ANGE NO(S)
APP. NO. <b>10809</b>	PERMIT NO. <b>G3-00246</b>	CERT. N	o. <b>3-00246C</b>	CERT. OF CH	ANGE NO(S)
ADAMS COUNTY ADAM-13-02	WRIA	41	)	WRTS No. CID No. 5	CG3-00246C 605032
		Su	perseding Doc. I	D No	
PURPOSE OF APPL	ICATION: Add 2 PO	)Ws & Chang	ge the place of u	se	
Date Application rece	ived: <u>Feb. 8, 2013</u>				
Statement of additional fee sent:			nount: \$	Date fee r	received:
Returned for completion or correction:				Received:	
Application mapped	d by:	date:			
OK'd by:			Date Noti	-	
Checked by: Protests:  SEPA REQUIRED  FIELD Examination by ROE map check	NO - EXEMPT  /:  ked by:	d date:	Time exp	vd	ied
Date Affidavit received Checked by:  Protests:  SEPA REQUIRED  FIELD Examination by  ROE map check DATE CHANGE ROE	NO - EXEMPT  v:  ked by:  Z ISSUED:	d date:	Time exp	vd	
Date Affidavit received Checked by:  Protests:  SEPA REQUIRED  FIELD Examination by  ROE map checked DATE CHANGE ROE  DEVELOPMENT SC	NO - EXEMPT  /: ced by: CISSUED:	d date:	Time exp. Date: Fee rc	vd Den	
Date Affidavit received the Checked by:  Protests:  SEPA REQUIRED  FIELD Examination by  ROE map checked the CHANGE ROE  DEVELOPMENT SC  BC due:	NO - EXEMPT  /:  ked by: CISSUED: CHEDULE:	date:	Time exp. Date: Fee rc	vd Den	ied
Date Affidavit received Checked by:  Protests:  SEPA REQUIRED  FIELD Examination by	NO - EXEMPT  /:  ked by:  CHEDULE:	date:  BC rcvd: CC rcvd:	Time exp. Date: Fee rc	vd Den	ied
Date Affidavit receive Checked by:  Protests:  SEPA REQUIRED  FIELD Examination by  ROE map checked DATE CHANGE ROE  DEVELOPMENT SC  BC due:  CC due:  PA due:	NO - EXEMPT  /:  Ked by:  LISSUED:  CHEDULE:	BC revd: CC revd: PA revd:	Time exp. Date: Fee rc	vd Den	ied ext:
Date Affidavit receive Checked by:  Protests:  SEPA REQUIRED  FIELD Examination by ROE map checked DATE CHANGE ROE  DEVELOPMENT SC BC due: CC due: PA due: PA FIELD EXAMINA	NO - EXEMPT  /:  ked by: EISSUED:  CHEDULE:  ATION REQUIRED -	BC rcvd: CC rcvd: PA rcvd:	Time exp. Date: Fee rc	ires:	ied  ext:  ext:  ext:
Date Affidavit receive Checked by:  Protests:  SEPA REQUIRED  FIELD Examination by ROE map checked DATE CHANGE ROE  DEVELOPMENT SC BC due: CC due: PA due:	NO - EXEMPT  /:  ked by: EISSUED: CHEDULE:  ATION REQUIRED	BC rcvd: CC rcvd: PA rcvd: DATE:	Time exp. Date: Fee rc  Approved  lams County	vd Den BY:	ied  ext:  ext:  ext:

## **ASSIGNMENT INFO:**

## SUBJECT TO REAL ESTATE EXCISE TAX

Assignment received:	Assignment approved:		
Assignee.	Submitted to Department of Revenue		
Assignee:			
Address:Phone #:			
Mailed assignee copy of current App/ROE date:	Initial:		
Assignment received:	Assignment approved:		
Assignee:	Submitted to Department of Revenue		
Address:	Date:		
Dhono #:	Initial:		
Mailed assignee copy of current App/ROE date:			
Assignment received:	Assignment approved:		
Assignee:	Submitted to Department of Revenue		
Assignee:	Date:		
Address:Phone #:			
Mailed assignee copy of current App/ROE date:	Initial:		
Assignment received:	Assignment approved:		
Assignee:	Submitted to Department of Revenue		
Address:			
Phone #:	Initial:		
Mailed assignee copy of current App/ROE date:	Initial.		
Assignment received:	Assignment approved:		
Aggigmag	Submitted to Department of Revenue		
Assignee:			
Address:			
Phone #: Mailed assignee copy of current App/ROE date:	Initial:		
Assignment received:	Assignment approved:		
Assignee:	Submitted to Department of Revenue		
Address:	Date:		
Phone #:	Initial:		
Mailed assignee copy of current App/ROE date:			